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| ☐ Check if this an amended filing |
|-----------------------------------|
| |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| t 1: Identify Yourself | | | |
|--|---|---|---|
| | About Debtor 1: | | About Debtor 2 (Spouse Only in a Joint Case): |
| Your full name | | | |
| Write the name that is on | Joseph | | Tina |
| your government-issued picture identification (for | First name | | First name |
| example, your driver's | Н | | M |
| | Middle name | | Middle name |
| | Russo | | Russo |
| meeting with the trustee. | Last name and Suffix (Sr., Jr., II, III) | | Last name and Suffix (Sr., Jr., II, III) |
| | | | |
| All other names you have used in the last 8 years | | | |
| Include your married or maiden names. | | | |
| Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-2624 | | xxx-xx-9191 |
| | Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. About Debtor 1: Joseph First name H Middle name Russo Last name and Suffix (Sr., Jr., II, III) All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. About Debtor 1: Joseph First name H Middle name Russo Last name and Suffix (Sr., Jr., II, III) All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number |

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Debtor 1 Joseph H Russo Debtor 2 Tina M Russo

Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): I have not used any business name or EINs. Business name(s) | | |
|----|---|---|---|--|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) | | | |
| | | EINs | EINs | | |
| 5. | Where you live | 1024 Fremont St Belvidere, IL 61008 Number, Street, City, State & ZIP Code Boone County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code | If Debtor 2 lives at a different address: Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. Number, P.O. Box, Street, City, State & ZIP Code | | |
| 6. | Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | | |

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| | otor 2 | Tina M Russo | | | | _ | Case number (if known) | | | |
|-----|------------------------|---|---|--|--|---|---|-----------------|--|--|
| | | | | | | | | | | |
| Pai | rt 2: | Tell the Court About | our Bankr | uptcy Ca | ase | | | | | |
| 7. | Banl | chapter of the kruptcy Code you are | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | | | |
| | cnoc | choosing to file under | ☐ Chapte | er 7 | | | | | | |
| | | | ☐ Chapte | er 11 | | | | | | |
| | | | ☐ Chapte | er 12 | | | | | | |
| | | | ■ Chapte | er 13 | | | | | | |
| 8. | How | you will pay the fee | abo orde a pr | ut how your er. If your e-printed ed to pay | ou may pay. Typically, if you are attorney is submitting your payr address. y the fee in installments. If you | paying the fee y ment on your be choose this opt | eck with the clerk's office in your local court for more of yourself, you may pay with cash, cashier's check, or rehalf, your attorney may pay with a credit card or chectorion, sign and attach the Application for Individuals to | money k with | | |
| | | | ☐ I red but app | quest that is not req lies to yo | luired to, waive your fee, and ma ur family size and you are unabl | request this opti ay do so only if y e to pay the fee | tion only if you are filing for Chapter 7. By law, a judge your income is less than 150% of the official poverty lie in installments). If you choose this option, you must fficial Form 103B) and file it with your petition. | ne that | | |
| 9. | | Have you filed for bankruptcy within the last 8 years? | ■ No. | | | | | | | |
| | | | ☐ Yes. | | | | | | | |
| | | | | District | | When | Case number | | | |
| | | | | District | | When | Case number | | | |
| | | | | District | | When | Case number | | | |
| 10. | | any bankruptcy | ■ No | | | | | | | |
| | filed not f you, | es pending or being by a spouse who is filing this case with or by a business ner, or by an ate? | ☐ Yes. | | | | | | | |
| | | | | Debtor | | | Relationship to you | | | |
| | | | | District | | When | Case number, if known | | | |
| | | | | Debtor | | | Relationship to you | | | |
| | | | | District | | When | Case number, if known | | | |
| 11. | | ou rent your dence? | ■ No. | Go to I | line 12. | | | | | |
| | 16210 | Jence: | ☐ Yes. | Has yo | our landlord obtained an eviction | judgment agair | inst you and do you want to stay in your residence? | | | |
| | | | | | No. Go to line 12. | | | | | |
| | | | | | Yes. Fill out <i>Initial Statement A</i> bankruptcy petition. | bout an Evictior | on Judgment Against You (Form 101A) and file it with t | his | | |

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Joseph H Russo

| Deb | tor 2 T | ina M Russo | | | | Case number (if known) | | |
|------|--|---|------------|---|--|---|--|--|
| | | | | | | | | |
| Part | 3: Re | port About Any Bu | sinesses \ | You Own | as a Sole Proprie | etor | | |
| | | | | | | | | |
| 12. | | a sole proprietor ull- or part-time ss? | ■ No. | Go to | Part 4. | | | |
| | | | ☐ Yes. | Name | and location of bus | siness | | |
| | busines an indivi separate as a cor | oroprietorship is a significant syou operate as idual, and is not a generation, ship, or LLC. | | Name of business, if any | | | | |
| | sole pro | ave more than one prietorship, use a sheet and attach | | Numb | er, Street, City, Sta | ate & ZIP Code | | |
| | it to this | | | Check | the appropriate bo | ox to describe your business: | | |
| | | | | | Health Care Busin | iness (as defined in 11 U.S.C. § 101(27A)) | | |
| | | | | | Single Asset Real | al Estate (as defined in 11 U.S.C. § 101(51B)) | | |
| | | | | | Stockbroker (as d | defined in 11 U.S.C. § 101(53A)) | | |
| | | | | | Commodity Broke | er (as defined in 11 U.S.C. § 101(6)) | | |
| | | | | | None of the above | ve | | |
| 13. | 3. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business If you are filing under Chapter 11, the court must know whether you are a small business debtor so the deadlines. If you indicate that you are a small business debtor, you must attach your most recent bala operations, cash-flow statement, and federal income tax return or if any of these documents do not expect the property of the second property | | | a small business debtor, you must attach your most recent balance sheet, statement of | | | | |
| | debtor? For a de | efinition of s <i>mall</i> | ■ No. | I am n | ot filing under Char | pter 11. | | |
| | | s debtor, see 11 § 101(51D). | □ No. | I am fi Code. | ling under Chapter | r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy | | |
| | | | ☐ Yes. | I am fi | ling under Chapter | r 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | |
| Part | 4: Re | port if You Own or | Have Any | Hazardo | us Property or An | ny Property That Needs Immediate Attention | | |
| 14. | | own or have any | ■ No. | | | | | |
| | alleged of immi | y that poses or is to pose a threat nent and able hazard to | ☐ Yes. | What is t | he hazard? | | | |
| | public health or safety? Or do you own any property that needs immediate attention? | | | | iate attention is why is it needed? | | | |
| | perishal livestoci | mple, do you own ble goods, or k that must be fed, lding that needs epairs? | | Where is | the property? | | | |
| | - | | | | | Number, Street, City, State & Zip Code | | |

Debtor 1

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Debtor 1 Joseph H Russo Debtor 2 Tina M Russo

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-81146 Doc 1 Filed 05/12/17 Entered 05/12/17 15:33:26 Desc Main Document Page 6 of 55

Debtor 1 Joseph H Russo Debtor 2 Tina M Russo Case number (if known) Part 6: **Answer These Questions for Reporting Purposes** What kind of debts do Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ■ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ☐ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 1-49 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 19. How much do you **\$0 - \$50,000** □ \$500,000,001 - \$1 billion □ \$1,000,001 - \$10 million estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million ■ \$0 - \$50.000 □ \$500,000,001 - \$1 billion estimate your liabilities □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100.000.001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Joseph H Russo /s/ Tina M Russo Joseph H Russo Tina M Russo Signature of Debtor 1 Signature of Debtor 2 Executed on May 12, 2017 Executed on May 12, 2017 MM / DD / YYYY MM / DD / YYYY

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| Debtor 1 Joseph H Russo Debtor 2 Tina M Russo | Document | Page 7 of 55 Case | e number (if known) |
|---|--|---|--|
| For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page. | under Chapter 7, 11, 12, or 13 of title 11, United for which the person is eligible. I also certify the | d States Code, and have ex at I have delivered to the de | Informed the debtor(s) about eligibility to proceed explained the relief available under each chapter ebtor(s) the notice required by 11 U.S.C. § 342(b) edge after an inquiry that the information in the |
| to me triis page. | /s/ William T. Cacciatore Jr. Signature of Attorney for Debtor William T. Cacciatore Jr. Printed name Eric Pratt Law Firm P.C. Firm name 5301 E. State St, Ste 116 Rockford, IL 61108 Number, Street, City, State & ZIP Code Contact phone 815-315-0683 6244392 | Date | May 12, 2017 MM / DD / YYYY rockford@jordanpratt.com |
| | Bar number & State | | <u> </u> |

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| | | Docum | CHE TAUC U UI JJ | | |
|--------------------|--------------------------|-------------------|------------------|---|---------------------|
| Fill in this infor | mation to identify your | case: | | | |
| Debtor 1 | Joseph H Russo | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | Tina M Russo | | | | |
| Spouse if, filing) | First Name | Middle Name | Last Name | | |
| Jnited States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | | |
| if known) | | | | [| Check if this is ar |
| | | | | | amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| _ | | | |
|-----|--|-------------|---------------------------|
| Par | t1: Summarize Your Assets | | |
| | | | assets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 92,000.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 8,700.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 100,700.00 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | iabilities nt you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 173,604.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 57,022.00 |
| | Your total liabilities | \$ | 230,626.00 |
| Par | t3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 3,449.10 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 2,849.10 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo | ur other sc | hedules. |
| 7. | ■ Yes What kind of debt do you have? | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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|----------|----------------|----------|------------------------|--|
| | Joseph H Russo | | 9 | |
| Debtor 2 | Tina M Russo | | Case number (if known) | |

| From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | \$_ | 2,306.00 |
|--|-----|----------|
| | 1 - | |

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Tota | al claim |
|--|------|----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$_ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$_ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$_ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$_ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$_ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| | Ca | se 17-8114 | 6 Doc 1 | | 05/12/17 ument | Entered 05/12/ Page 10 of 55 | 17 15:33 | :26 De | esc Main | |
|------------|---------------------------|--|----------------------|-----------|--|---|----------------|---------------------------------|---|---------------------------|
| Fill | in this inforn | nation to identify | your case and th | is filinç | g: | | | | | |
| Deb | tor 1 | Joseph H Ru | | Name | | Last Name | | | | |
| | tor 2 use, if filing) | Tina M Russ | | Name | | Last Name | | | | |
| Unit | ed States Ba | nkruptcy Court for | the: NORTHER | N DIST | RICT OF ILLIN | IOIS | | | | |
| Cas | e number _ | | | | | - | | | ☐ Check i | f this is an ed filing |
| _ | | rm 106A/E | _ | | | | | | | |
| <u> </u> | neaui | <u>e A/B: Pı</u> | operty | | | | | | | 12/15 |
| Part Do | 1: Describe | tion. Each Residence, B nave any legal or eq | uilding, Land, or Ot | her Real | Estate You Ow | e top of any additional page on or Have an Interest In land, or similar property? | | | | |
| 1.1 | | | | What | is the property | ? Check all that apply | | | | |
| | 1024 Frem Street address, | ont St if available, or other des | scription | | Single-family h Duplex or mult Condominium | i-unit building | the amoun | t of any secure | laims or exempti ed claims on <i>Sch</i> ims Secured by | hedule D: |
| | Belvidere | IL | 61008-0000 | | Manufactured Land | or mobile home | Current va | | Current valu | |
| | City | State | ZIP Code | | Investment pro | pperty | \$9 | 92,000.00 | \$9 | 2,000.00 |
| | | | | | Other | in the manufactor of | (such as f | | your ownership nancy by the en | |
| | | | | Who | | in the property? Check one | Fee sim | | | |
| | Boone | | | | Debtor 2 only | | | | | |
| | County | | | | Debtor 1 and [| Debtor 2 only | Object | elf Abie! | | . 4 |
| | | | | | At least one of | the debtors and another | | t if this is cor structions) | mmunity proper | ıy |
| | | | | | r information yo | ou wish to add about this it on number: | em, such as lo | cal | | |

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$92,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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| | ina M Russo | | | Case number (if known) | |
|-------------------|--------------------|------------------------------|---|---|---|
| | trucks, tractors, | , sport utility vel | nicles, motorcycles | | |
| □ No ■ Yes | | | | | |
| | | | | | |
| .1 Make: | Chevy | | Who has an interest in the property? Check one | | ed claims or exemptions. Put ecured claims on <i>Schedule D:</i> |
| Model: | Tahoe | | Debtor 1 only | | Claims Secured by Property. |
| Year: | 1998 | | Debtor 2 only | Current value of th | e Current value of the |
| Approxin | nate mileage: | 145000 | ■ Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| Other inf | formation: | | \square At least one of the debtors and another | | |
| | | | ☐ Check if this is community property (see instructions) | \$1,500.0 | \$1,500.0 |
| 2 Make: | Ford | | Who has an interest in the property? Check one | | ed claims or exemptions. Put |
| Model: | Escape | | Debtor 1 only | | ecured claims on Schedule D: Claims Secured by Property. |
| Year: | 2005 | | Debtor 2 only | Oreanors who mave | Claims decured by Froperty. |
| | nate mileage: | 80000 | Debtor 1 and Debtor 2 only | Current value of th entire property? | e Current value of the portion you own? |
| | formation: | | Debtor 1 and Debtor 2 only At least one of the debtors and another | entire property? | portion you own? |
| Outer iiii | orriation. | | At least one of the debtors and another | | |
| | | | ☐ Check if this is community property (see instructions) | \$3,100.0 | \$3,100.0 |
| 3 Make: | Chevy | | Who has an interest in the property? Check one | | ed claims or exemptions. Put |
| Model: | Astro | | □ Debtor 1 only | | ecured claims on Schedule D: Claims Secured by Property. |
| Year: | 1999 | | Debtor 2 only | Ordanoro Who Have | Claime Cocarda by Froporty. |
| | nate mileage: | 200000 | ■ Debtor 1 and Debtor 2 only | Current value of th entire property? | e Current value of the portion you own? |
| • • | formation: | | ☐ At least one of the debtors and another | chare property: | portion you own: |
| | | | ☐ Check if this is community property | \$1,000.0 | 90 \$1,000.0 |
| | | | (see instructions) | | |
| | | | d other recreational vehicles, other vehicles, tercraft, fishing vessels, snowmobiles, motorcyc | | |
| | | | n for all of your entries from Part 2, including hat number here | | \$5,600.00 |
| rt 3: Descri | be Your Personal a | and Household Ite | ems | | |
| | | | erest in any of the following items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| Examples: □ No | | shings furniture, linens, | china, kitchenware | | |
| Yes. De | scribe | | | | |
| | OI | der Household | furniture & personal belongings | | \$2,000.0 |

Official Form 106A/B Schedule A/B: Property

page 2

Case 17-81146 Doc 1 Filed 05/12/17 Entered 05/12/17 15:33:26 Desc Main Page 12 of 55 Document Debtor 1 Joseph H Russo Debtor 2 Tina M Russo Case number (if known) 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... \$400.00 Tv, Computers, Cell phones, and other electronic devices 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$300.00 Necessary wearing apparel 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Π Nο Yes. Describe..... \$200.00 Various Costume Jewelry and Wedding Bands 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,900.00 for Part 3. Write that number here

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

Case 17-81146 Doc 1 Filed 05/12/17 Entered 05/12/17 15:33:26 Desc Main Page 13 of 55 Document Debtor 1 Joseph H Russo Tina M Russo Debtor 2 Case number (if known) 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... 17.1. Checking **PNC Bank** \$200.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

Official Form 106A/B Schedule A/B: Property page 4

☐ Yes. Give specific information about them...

■ No

| | | Case 17-81146 | DOC 1 | Document | Page 14 | 05/12/17 15.33.20 | Desc Main |
|-----|------------------|--|------------------------------|--------------------------|---------------------|----------------------------------|--|
| | btor 1 btor 2 | Joseph H Russo Tina M Russo | | Document | | Case number (if known) | |
| 27. | License | es, franchises, and other o | eneral intang | gibles | | | |
| | ■ No | 01 | , | cooperative association | on holdings, liquo | or licenses, professional licens | ses |
| [| ☐ Yes. | Give specific information at | out them | | | | |
| Мо | ney or p | property owed to you? | | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax ref | unds owed to you | | | | | |
| | ■ No □ Yes. | Give specific information ab | out them, inclu | uding whether you alre | eady filed the ref | turns and the tax years | |
| ı | Examp ■ No | · | | sal support, child suppo | oort, maintenanc | e, divorce settlement, property | / settlement |
| I | ☐ Yes. (| Give specific information | | | | | |
| _ | | mounts someone owes you les: Unpaid wages, disability benefits; unpaid loans y | y insurance pa | | nefits, sick pay, v | vacation pay, workers' compe | nsation, Social Security |
| | | Give specific information | | | | | |
| ı | Examp ■ No | | | | (HSA); credit, ho | omeowner's, or renter's insura | nce |
| [| □ Yes. I | Name the insurance compa Comp | ny of each pol pany name: | icy and list its value. | Ве | eneficiary: | Surrender or refund value: |
| | If you a | erest in property that is do are the beneficiary of a living ne has died. | | | | or are currently entitled to rec | eive property because |
| | ■ No □ Yes. | Give specific information | | | | | |
| | | against third parties, whe les: Accidents, employment | | | | emand for payment | |
| I | ☐ Yes. | Describe each claim | | | | | |
| | Other o | ontingent and unliquidate | d claims of e | very nature, includin | ng counterclain | ns of the debtor and rights to | o set off claims |
| | | Describe each claim | | | | | |
| | Any fin No | ancial assets you did not | already list | | | | |
| I | ☐ Yes. | Give specific information | | | | | |
| 36. | | ne dollar value of all of yo rt 4. Write that number he | | | | | \$200.00 |
| Par | t 5: Des | scribe Any Business-Related | Property You C | own or Have an Interest | In. List any real e | estate in Part 1. | |
| 37. | Do you o | wn or have any legal or equit | able interest in | any business-related p | property? | | |
| | No. Go | to Part 6. | | | | | |

Official Form 106A/B Schedule A/B: Property page 5

 \square Yes. Go to line 38.

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| D-64 4 | Joseph H Russo | Page 15 of | 55 | |
|----------------------|--|-------------------------|---------------------------|----------------|
| Debtor 1 Debtor 2 | · | | Case number (if known) | |
| | Describe Any Farm- and Commercial Fishing-Related Property You f you own or have an interest in farmland, list it in Part 1. | u Own or Have an Intere | st In. | |
| 46. Do y | ou own or have any legal or equitable interest in any farm- | or commercial fishin | ng-related property? | |
| ■ N | lo. Go to Part 7. | | | |
| ΠY | es. Go to line 47. | | | |
| Part 7: | Describe All Property You Own or Have an Interest in That Yo | u Did Not List Above | | |
| ■ No | mples: Season tickets, country club membership s. Give specific information d the dollar value of all of your entries from Part 7. Write the | nat number here | | \$0.00 |
| | t 1: Total real estate, line 2 | | | \$92,000.00 |
| | t 2: Total vehicles, line 5 | \$5,600.00 | | Ψ02,000.00 |
| 57. Pa r | t 3: Total personal and household items, line 15 | \$2,900.00 | | |
| 58. Par | t 4: Total financial assets, line 36 | \$200.00 | | |
| 59. Par | t 5: Total business-related property, line 45 | \$0.00 | | |
| 60. Par | t 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. Par | t 7: Total other property not listed, line 54 | \$0.00 | | |
| 62. Tot | al personal property. Add lines 56 through 61 | \$8,700.00 | Copy personal property to | otal \$8,700.0 |
| 63. Tot | al of all property on Schedule A/B. Add line 55 + line 62 | | | \$100,700.00 |

Official Form 106A/B Schedule A/B: Property page 6

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Page 16 of 55 Document Fill in this information to identify your case: Debtor 1 Joseph H Russo Middle Name Last Name First Name Debtor 2 Tina M Russo (Spouse if, filing) First Name Middle Name Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of t | he exemption you claim | Specific laws that allow exemption |
|--|--------------------------------------|--------------|---|------------------------------------|
| | Copy the value from Schedule A/B | Check only o | one box for each exemption. | |
| 1998 Chevy Tahoe 145000 miles | \$1,500.00 | = | \$1,500.00 | 735 ILCS 5/12-1001(b) |
| 2.1.0 110111 06.1100a10 772. 01.1 | | | of fair market value, up to oplicable statutory limit | |
| 1999 Chevy Astro 200000 miles | \$1,000.00 | . | \$1,000.00 | 735 ILCS 5/12-1001(b) |
| Ellie Holli odiloddio 702. G.C | | | of fair market value, up to oplicable statutory limit | |
| Older Household furniture & personal belongings | \$2,000.00 | | \$2,000.00 | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: 6.1 | | | of fair market value, up to oplicable statutory limit | |
| Tv, Computers, Cell phones, and other electronic devices | \$400.00 | | \$400.00 | 735 ILCS 5/12-1001(b) |
| Line from <i>Schedule A/B</i> : 7.1 | | | of fair market value, up to oplicable statutory limit | |
| Necessary wearing apparel Line from Schedule A/B: 11.1 | \$300.00 | . | \$300.00 | 735 ILCS 5/12-1001(a) |
| Line from <i>Generalie AVD</i> . 11.1 | | | of fair market value, up to oplicable statutory limit | |

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Joseph H Russo Debtor 1 Tina M Russo Debtor 2 Case number (if known) Brief description of the property and line on *Schedule A/B* that lists this property Current value of the Amount of the exemption you claim Specific laws that allow exemption portion you own Copy the value from Check only one box for each exemption. Schedule A/B Checking: PNC Bank 735 ILCS 5/12-1001(b) \$200.00 \$200.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? Yes

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| | | Document | Page 18 | of 55 | | |
|----------------------------------|---------------------|--|-----------------|-----------------------------------|--|-------------------|
| Fill in this information | on to identify you | ır case: | | | | |
| Debtor 1 , | Joseph H Russo | | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | Γina M Russo | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Bankru | ptcy Court for the: | NORTHERN DISTRICT OF ILLIN | NOIS | | | |
| Case number | | | | | | |
| (if known) | | | | | ☐ Check | if this is an |
| | | | | | ameno | led filing |
| Official Form 1 | 06D | | | | | |
| | | Who Have Claims S | ecured | by Propert | y | 12/15 |
| | | If two married people are filing together out, number the entries, and attach it to | | | | |
| 1. Do any creditors hav | e claims secured by | vour property? | | | | |
| • | • | his form to the court with your other s | chadulas Vo | u have nothing else t | o report on this form | |
| _ | | | onedules. To | u nave nothing else t | o report on this form. | |
| Yes. Fill in all | of the information | below. | | | | |
| Part 1: List All Se | ecured Claims | | | 0.1 | 0.1. 0 | 0.1.0 |
| | | more than one secured claim, list the credi | | Column A | Column B | Column C |
| | | a particular claim, list the other creditors in cal order according to the creditor's name. | | Amount of claim Do not deduct the | Value of collateral that supports this | Unsecured portion |
| | | | | value of collateral. | claim | If any |
| 2.1 Caliber Home Creditor's Name | Loans, In | Describe the property that secures the | | \$170,454.00 | \$92,000.00 | \$78,454.00 |
| Creditor's Name | | 1024 Fremont St Belvidere, IL 6 Boone County | 1008 | | | |
| Po Box 24610 | 1 | As of the date you file, the claim is: Ch | neck all that | | | |
| Oklahoma Cit | | apply. Contingent | | | | |
| Number, Street, City | - | ☐ Unliquidated | | | | |
| rumber, eneet, eny | , clate a zip code | ☐ Disputed | | | | |
| Who owes the debt? | Check one. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | | An agreement you made (such as mo | ortgage or secu | ıred | | |
| ■ Debtor 2 only | | car loan) | . 5.5. | | | |
| ☐ Debtor 1 and Debtor | 2 only | ☐ Statutory lien (such as tax lien, mech | anic's lien) | | | |
| ☐ At least one of the de | | ☐ Judgment lien from a lawsuit | , | | | |
| $\hfill\Box$ Check if this claim | relates to a | ☐ Other (including a right to offset) | | | | |
| community debt | | | | | | |
| | Opened | | | | | |
| | 08/06 Last | | | | | |
| | Active | | 0.400 | | | |
| Date debt was incurred | d <u>8/11/16</u> | Last 4 digits of account numbe | er 6482 | | | |
| | | | | | | |
| 2.2 OneMain | | Describe the property that secures the | | \$3,150.00 | \$3,100.00 | \$50.00 |
| Creditor's Name | | 2005 Ford Escape 80000 miles | | | | |
| Attn: Bankrup | tov | | | | | |
| Attn: Bankrup 601 Nw 2nd S | | As of the date you file, the claim is: Ch | neck all that | | | |
| Evansville, IN | | apply. Contingent | | | | |
| Number, Street, City, | | ☐ Unliquidated | | | | |
| , 5.100 ij 91ty: | | ☐ Disputed | | | | |
| Who owes the debt? | Check one. | Nature of lien. Check all that apply. | | | | |
| ■ Debtor 1 only | | An agreement you made (such as mo | ortgage or secu | ıred | | |
| Debtor 2 only | | car loan) | J. J. 2. 0000 | - | | |
| Debtor 1 and Debtor | 2 only | ☐ Statutory lien (such as tax lien, mech | anic's lien) | | | |

☐ Judgment lien from a lawsuit

 \square At least one of the debtors and another

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| Debtor 1 | Joseph H F | Russo | | | Case number (if know) | |
|-------------|---------------------------------------|---|---------------------------------------|------------|-----------------------|---|
| | First Name | Middle Na | ame Last Name | _ | _ | |
| Debtor 2 | Tina M Rus | SSO SSO | | | | |
| | First Name | Middle Na | ame Last Name | | | |
| | if this claim re unity debt | elates to a | ☐ Other (including a right to offset) | | | |
| Date debt | was incurred | Opened 08/16 Last Active 3/15/17 | Last 4 digits of account nur | mber 4047 | | |
| - Date debt | was incurred | 3/13/11 | - Last 4 digits of account har | | | |
| | | | | | | |
| Add the | dollar value of | your entries in C | olumn A on this page. Write that nu | mber here: | \$173,604.00 | |
| | the last page of the last number here | • | the dollar value totals from all page | 5. | \$173,604.00 | 1 |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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| | Case | 517-01140 L | | Document | Page 20 of 55 | J.33.20 Des | oc iviali i |
|----------------------|--|-----------------------------|---------------------------------|---|--|----------------------------|---------------------------|
| Fill in t | his informat | ion to identify your o | | | | | |
| Debtor | 1 | Joseph H Russo | | | | | |
| 20210. | _ | First Name | Middle N | lame | Last Name | | |
| Debtor | _ | Tina M Russo | | | | | |
| (Spouse i | if, filing) | First Name | Middle N | lame | Last Name | | |
| United | States Bankr | uptcy Court for the: | NORTHER | N DISTRICT OF IL | LINOIS | | |
| Case n | umber | | | | | | |
| (if known) |) | | | | | | Check if this is an |
| | | | | | | a | mended filing |
| Offici | al Form 1 | 106F/F | | | | | |
| | | : Creditors W | ho Have | Unsecured | l Claims | | 12/15 |
| | | | | | TY claims and Part 2 for creditors wi | th NONPRIORITY clai | |
| Schedule ft. Atta | e D: Creditors ch the Continu d case numbe | Who Have Claims Secu | ured by Prope e. If you have | rty. If more space is no information to re | Do not include any creditors with pa needed, copy the Part you need, fill pport in a Part, do not file that Part. C | it out, number the en | tries in the boxes on the |
| 1. Do | any creditors | have priority unsecured | d claims again | st you? | | | |
| | No. Go to Part | 2. | | | | | |
| | Yes. | | | | | | |
| Part 2: | | f Your NONPRIORIT | Y Unsecured | d Claims | | | |
| 3. Do | any creditors | have nonpriority unsec | ured claims a | gainst you? | | | |
| | No. You have r | othing to report in this pa | art. Submit this | form to the court with | n your other schedules. | | |
| • | Yes. | | | | | | |
| uns | ecured claim, li n one creditor h | st the creditor separately | / for each claim | . For each claim lister | he creditor who holds each claim. If d, identify what type of claim it is. Do no have more than three nonpriority unse | ot list claims already inc | cluded in Part 1. If more |
| | | | | | | | Total claim |
| 4.1 | American F | amily Ins | | Last 4 digits of acc | count number | | \$91.00 |
| | Nonpriority Cr | editor's Name | | M (1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - | | | |
| | Madison, V | VI 53777 | | When was the deb | ot incurred? | | - |
| | | t City State Zlp Code | | As of the date you | file, the claim is: Check all that apply | | |
| | Who incurred | the debt? Check one. | | | | | |
| | Debtor 1 o | nly | | ☐ Contingent | | | |
| | Debtor 2 o | nly | | ☐ Unliquidated | | | |
| | Debtor 1 a | nd Debtor 2 only | | ☐ Disputed | | | |
| | ☐ At least or | e of the debtors and and | other | Type of NONPRIOR | RITY unsecured claim: | | |
| | ☐ Check if t | his claim is for a comn | nunity | ☐ Student loans | | | |
| | debt | | - | | ing out of a separation agreement or di | vorce that you did not | |
| | | subject to offset? | | report as priority cla | | | |
| | ■ No | | | • | n or profit-sharing plans, and other simi | lar debts | |
| | ☐ Yes | | | Other. Specify | fees | | |

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| Debto | or 1 Joseph H Russo or 2 Tina M Russo | Case number (if know) | |
|-------|---|---|-------------|
| 4.2 | Anselmo,Lindberg, Oliver | Last 4 digits of account number | \$0.00 |
| | Nonpriority Creditor's Name 1771 W. Diehl Rd Suite 120 Naperville, IL 60563 | When was the debt incurred? | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ☐ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify notice | |
| 4.3 | Berks Credit & Collections | Last 4 digits of account number 7941 | \$422.00 |
| | Nonpriority Creditor's Name Po Box 329 | When was the debt incurred? Opened 09/13 | |
| | Temple, PA 19560 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | As of the date you me, the claim is. Oneon all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | ■ Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Collection Attorney Rockford Open Mri Llc | |
| 4.4 | Cepamerica | Last 4 digits of account number | \$667.00 |
| | Nonpriority Creditor's Name Box 582663 | When was the debt incurred? | |
| | Modesto, CA 95358 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | , | |
| | ☐ Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ■ Debtor 1 and Debtor 2 only | □ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify medical | |

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| Debtor 2 | 1 Joseph H Russo 2 Tina M Russo | | Case number (if know) | |
|----------|--|--|---|-------------------|
| | | | | 4000.00 |
| | Convergent Heathcare Recovery Nonpriority Creditor's Name | Last 4 digits of account number | 8417 | \$236.00 |
| | 121 Ne Jefferson St | When was the debt incurred? | Opened 11/10/11 | _ |
| | Suite 100 | | | |
| | Peoria, IL 61602 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | , | | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | ☐ Yes | Other. Specify Cbo Cv | | |
| | | — Other. opcomy | | = |
| 4.6 | Credit Collection | Last 4 digits of account number | | \$0.00 |
| | Nonpriority Creditor's Name | - | | Ψ0.00 |
| | 725 Canton St | When was the debt incurred? | | - |
| | Norwood, MA 02062 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | , | | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | No | ☐ Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify notice only | | - |
| 47 | 0 111 0 | | 4000 | # 4.400.00 |
| | Creditors Protection S Nonpriority Creditor's Name | Last 4 digits of account number | 1686 | \$1,190.00 |
| | Po Box 4115 | When was the debt incurred? | Opened 2/03/15 | |
| | Rockford, IL 61101 | | | - |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | | | | |
| | Debtor 1 only | Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | Disputed | d alaim. | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured ☐ Student loans | u Ciaiiii: | |
| | ☐ Check if this claim is for a community debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | iration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | □ Yes | ■ Other Specify James Cha | oko D D S | |
| | - - | - Other Specify | - | - |

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| Debtor Debtor | 1 Joseph H Russo 2 Tina M Russo | | Case number (if know) | |
|------------------|--|--|--|----------|
| 4.8 | Frontier Communication Nonpriority Creditor's Name | Last 4 digits of account number | 2145 | \$393.00 |
| | 19 John St Middletown, NY 10940 | When was the debt incurred? | Opened 05/14 Last Active 8/12/15 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify Agriculture | | |
| 4.9 | Il Pathologist Nonpriority Creditor's Name | Last 4 digits of account number | | \$730.00 |
| | Box 9846 Peoria, IL 61612 | When was the debt incurred? | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | ☐ Yes | Other. Specify medical | | |
| 4.1 | Mutual Management Serv | Last 4 digits of account number | 0932 | \$919.00 |
| | Nonpriority Creditor's Name | _ | | |
| | 7177 Crimson Ridge Dr St Rockford, IL 61107 | When was the debt incurred? | Opened 10/11 Last Active 6/17/13 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | No | ☐ Debts to pension or profit-sharin | a plans, and other similar debts | |
| | — INO | | ttorney Swedishamerican Hospital | |
| | Yes | Other. Specify Er | and the second state of the second se | |

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| Tina M Russo | | |
|---|--|------------|
| OSF Healthcare | Last 4 digits of account number | \$45,000.0 |
| Nonpriority Creditor's Name 7978 Solution Center | When was the debt incurred? | |
| Chicago, IL 60677-7009 | | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | Contingent | |
| Debtor 2 only | Unliquidated | |
| ■ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| Check if this claim is for a community | Student loans | |
| debt Is the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | lacktriangle Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify _medical | |
| osf lifeline | Last 4 digits of account number | \$1,200.0 |
| Nonpriority Creditor's Name | | + 1,=0010 |
| Box 17115 | When was the debt incurred? | |
| Rockford, IL 61110 | - Acceptable have a filled a state to Olympia to the | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| Debtor 1 only | П | |
| Debtor 2 only | Contingent | |
| _ | Unliquidated | |
| Debtor 1 and Debtor 2 only | Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| □ Yes | ■ Other. Specify medical | |
| | | |
| OSF Medical Center | Last 4 digits of account number | \$4,000.0 |
| Nonpriority Creditor's Name P.O. Box 91011 | When was the debt incurred? | |
| Chicago, IL 60680 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | and the second s | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ■ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| At least one of the debtors and another Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | repert de priority diamie | |
| No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |

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| Debt | or 2 Tina M Russo | Case number (if know) | | | | | |
|----------|--|--|------------|--|--|--|--|
| 4.1 4 | Rockford Mercantile | Last 4 digits of account number 4462 | \$774.00 | | | | |
| | Nonpriority Creditor's Name 2502 S. Alpine Rd Rockford, IL 61108 | When was the debt incurred? Opened 6/02/14 | _ | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| | Yes | ■ Other. Specify Osf St Anthony Medical Ctr | _ | | | | |
| 4.1 | Rockford Radiology | | \$1,400.00 | | | | |
| 5 | Nonpriority Creditor's Name | Last 4 digits of account number | Ψ1,400.00 | | | | |
| | Box 1790 | When was the debt incurred? | | | | | |
| | Brookfield, WI 53008 | As of the date you file, the claim is: Check all that apply | = | | | | |
| | Number Street City State Zlp Code | | | | | | |
| | Who incurred the debt? Check one. | _ | | | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | |
| | \square Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| | ☐ Yes | Other. Specify medical | _ | | | | |
| 4.1 6 | Stellar Recovery Inc | Last 4 digits of account number 7419 | \$0.00 | | | | |
| 0 | Nonpriority Creditor's Name | | | | | | |
| | Attn: Bankruptcy 4500 Salisbury Road Ste 105 | When was the debt incurred? Opened 03/14 | _ | | | | |
| | Jackonville, FL 32216 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | | | | |
| | Who incurred the debt? Check one. | The or and gate ho, and diamined officer all that apply | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | |
| | ☐ Debtor 2 only | | | | | | |
| | • | ☐ Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | | | | | |
| | Is the claim subject to offset? | report as priority claims | | | | | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| | Yes | Other. Specify Collection Attorney Dish Network | _ | | | | |
| | | | _ | | | | |

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| ² Tina M Russo | | Case number (if know) | | | |
|---|--|---|--------|--|--|
| Synchrony Bank/Care Credit | Last 4 digits of account number | 3137 | \$0.00 | | |
| Nonpriority Creditor's Name | _ | | | | |
| Attn: Bankruptcy | | Opened 7/27/12 Last Active | | | |
| Po Box 956060 | When was the debt incurred? | 11/19/12 | | | |
| Orlando, FL 32896 | _ | | | | |
| Number Street City State Zlp Code | As of the date you file, the claim i | is: Check all that apply | | | |
| Who incurred the debt? Check one. | | | | | |
| ☐ Debtor 1 only | ☐ Contingent | | | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | |
| ☐ Yes | ■ Other. Specify Charge Acc | ount | | | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|--------------|-----|---|-----|-----------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 0.00 |
| | | | | Total Claim |
| | 6f. | Student loans | 6f. | \$ 0.00 |
| Total claims | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 57,022.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 57,022.00 |

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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| | | Docume | THE TAUC ZT OF JJ | |
|---|-------------------------|-------------------|-------------------|--------------------------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Joseph H Russo | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Tina M Russo | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| ı | Person or | company with | whom you have the r, Street, City, State and ZIP | e contract or lease | State what the contract or lease is for | |
|-----|-----------|--------------|---|---------------------|---|--|
| 2.1 | | | | | | |
| | Name | | | | | |
| | Number | Street | | | <u> </u> | |
| | City | | State | ZIP Code | <u> </u> | |
| 2.2 | | | | | | |
| | Name | | | | | |
| | Number | Street | | | <u> </u> | |
| | City | | State | ZIP Code | _ | |
| 2.3 | Oity | | Otate | Zii Code | | |
| 2.0 | Name | | | | | |
| | Number | Street | | | | |
| | City | | State | ZIP Code | <u> </u> | |
| 2.4 | | | | | | |
| | Name | | | | _ | |
| | Number | Street | | | _ | |
| | City | | State | ZIP Code | | |
| 2.5 | Oity | | Otate | Zii Gode | | |
| | Name | | | | | |
| | Number | Street | | | <u> </u> | |
| | City | | State | ZIP Code | _ | |

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|-----------------------------|--|--|-----------------------|---|
| Fill in this | s information to identify your | case: | | |
| Debtor 1 | Joseph H Russo | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, fil | Tina M Russo First Name | Middle Nove | Lost Nome | |
| | <i>5,</i> | Middle Name | Last Name | |
| United Sta | ates Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case num | nber | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |
| Officia | al Form 106H | | | |
| | dule H: Your Cod | ebtors | | 12/15 |
| 301100 | adio III. Todi God | | | 12/13 |
| ill it out, a our name | | boxes on the left. Attach . Answer every question | the Additional Page t | ion. If more space is needed, copy the Additional Page, o this page. On the top of any Additional Pages, write as a codebtor. |
| _ | | | | |
| ■ No | | | | |
| ☐ Ye | S | | | |
| | thin the last 8 years, have you na, California, Idaho, Louisiana, | | | y? (Community property states and territories include ington, and Wisconsin.) |
| ■ No | . Go to line 3. | | | |
| ☐ Ye | s. Did your spouse, former spou | use, or legal equivalent live | with you at the time? | |
| | | | | |
| in line Form | e 2 again as a codebtor only i | f that person is a guaran | tor or cosigner. Make | if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Officia 16G). Use Schedule D, Schedule E/F, or Schedule G to fi |
| | Column 1: Your codebtor Name, Number, Street, City, State and ZI | P Code | | Column 2: The creditor to whom you owe the debt Check all schedules that apply: |
| 3.1 | | | | ☐ Schedule D, line |
| 0.1 | Name | | | ☐ Schedule E/F, line |
| | | | | ☐ Schedule G, line |
| | Number Street | | | <u> </u> |
| | City | State | ZIP Code | |
| | | | | |
| 3.2 | Name | | | Schedule D, line |
| | | | | ☐ Schedule E/F, line |
| | Number Office | | | |
| | Number Street | | | |

State

City

ZIP Code

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| | I: Your Income nd accurate as possible. If two married people are filing together (D | 12/15 |
|-----------------------|---|---|
| Official Fo | | MM / DD/ YYYY |
| | | 13 income as of the following date: |
| | | ☐ A supplement showing postpetition chapter |
| (If known) | | ☐ An amended filing |
| Case number | | Check if this is: |
| United States Ban | skruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS | |
| (Spouse, if filing) | | |
| Debtor 2 | Tina M Russo | |
| Debtor 1 | Joseph H Russo | |
| Fill in this informat | tion to identify your case: | |
| | | |

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | Describe Employment | | | |
|-----|---|----------------------|---|--------------------------------|
| 1. | Fill in your employment information. | | Debtor 1 | Debtor 2 or non-filling spouse |
| | If you have more than one job, attach a separate page with information about additional | Employment status | ■ Employed□ Not employed | ☐ Employed ■ Not employed |
| | employers. | Occupation | bus driver | unemployed |
| | Include part-time, seasonal, or self-employed work. | Employer's name | First Student | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | | |
| | | How long employed th | nere?1 1/2 years | |
| Par | Give Details About Mor | nthly Income | | |

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

| | | | non | -filing spouse |
|----|-----|----------|-----|----------------|
| | | | | |
| 2. | \$ | 1,106.14 | \$ | 0.00 |
| | | | _ | |
| 3. | +\$ | 0.00 | +\$ | 0.00 |
| 4. | \$ | 1,106.14 | \$ | 0.00 |
| | 1 | | l I | |

For Debtor 2 or

For Debtor 1

Official Form 106I Schedule I: Your Income page 1

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Joseph H Russo Debtor 1 Debtor 2 Tina M Russo Case number (if known) For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 1.106.14 0.00 List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. 172.04 0.00 Mandatory contributions for retirement plans 5b. 5b. 0.00 0.00 5c. Voluntary contributions for retirement plans 5c. 0.00 \$ 0.00 Required repayments of retirement fund loans 5d. 5d. 0.00 0.00 5e. Insurance 5e. 0.00 0.00 5f. **Domestic support obligations** 5f. 0.00 0.00 5g. **Union dues** 5g. \$ \$ 26.00 0.00 Other deductions. Specify: 5h. 5h.+ 0.00 \$ 0.00 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 198.04 0.00 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 7 \$ 908.10 0.00 8 List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a \$ 0.00 0.00 \$ 8h. Interest and dividends 8h. \$ 0.00 0.00 Family support payments that you, a non-filing spouse, or a dependent 8c. regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 0.00 8d. **Unemployment compensation** 8d. 0.00 0.00 **Social Security** 8e. 8e. 1,341.00 0.00 Other government assistance that you regularly receive 8f. Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. 0.00 \$ 0.00 Specify: 8g. Pension or retirement income \$ \$ 0.00 8g. 0.00 Other monthly income. Specify: mother 8h.+ \$ \$ 8h. 1,200.00 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. 0.00 2,541.00 10. Calculate monthly income. Add line 7 + line 9. 10. \$ \$ 3,449.10 0.00 \$ 3,449.10 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 3,449.10 12. applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No. П Yes. Explain:

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| Fill | in this informa | ation to identify yo | our case: | | | | | |
|------------|----------------------------|---|-------------------------|---|--|-----------------------|------------------------------------|-------------------------------|
| | otor 1 | | | | | Char | le if their inc | |
| Den | OLOT 1 | Joseph H Rus | SSO | | | | k if this is: An amended filing | |
| Deb | otor 2 | Tina M Russo |) | | | | A supplement show | wing postpetition chapter |
| (Spo | ouse, if filing) | | | | | | 13 expenses as of | the following date: |
| Unit | ted States Bank | ruptcy Court for the | : NORTH | ERN DISTRICT OF ILLIN | OIS | - | MM / DD / YYYY | |
| | se number | | | | | | | |
| (If K | nown) | | | | | | | |
| 0 | fficial Fo | rm 106J | | | | | | |
| S | chedule | J: Your | Exper | nses | | | | 12/1 |
| Be info | as complete ormation. If m | and accurate as | possible. eded, atta | . If two married people ar ch another sheet to this | | | | |
| Par | | ribe Your House | hold | | | | | |
| 1. | Is this a join | | | | | | | |
| | □ No. Go to | o line 2. es Debtor 2 live i | in a conar | ata hausahald? | | | | |
| | | | iii a sepai | ate nousenoiu: | | | | |
| | ■ N □ Y | - | st file Offici | al Form 106J-2, <i>Expenses</i> | s for Separate House | e <i>hold</i> of Debt | or 2. | |
| 2. | Do you hav | e dependents? | □ No | | | | | |
| | Do not list D Debtor 2. | ebtor 1 and | ■ Yes. | Fill out this information for each dependent | Dependent's relat Debtor 1 or Debto | | Dependent's age | Does dependent live with you? |
| | Do not state dependents | | | | Mother | | | □ No ■ Yes |
| | | | | | | | 0.4 | □ No |
| | | | | | Daughter | | | ■ Yes □ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No |
| 2 | De veur ev | | _ | | | | | ☐ Yes |
| 3. | expenses o | penses include of people other t d your depende | han 👝 | No Yes | | | | |
| Par | rt 2: Estim | nate Your Ongoi | na Monthi | v Expenses | | | | |
| Est | timate your ex | xpenses as of you | our bankr | uptcy filing date unless y y is filed. If this is a supp | | | | |
| | | | | government assistance i | | | | |
| | ficial Form 10 | | a nave inc | cluded it on Schedule I: \ | rour income | | Your exp | enses |
| 4. | | or home owners | | ses for your residence. I | nclude first mortgag | e 4. \$ | | 1,645.00 |
| | . , | ded in line 4: | • | | | | | |
| | | | | | | 40 M | | 0.00 |
| | | estate taxes erty, homeowner's | s. or renter | 's insurance | | 4a. \$ 4b. \$ | - | 0.00 |
| | | • | | ıpkeep expenses | | 4c. \$ | | 0.00 |
| | 4d. Home | owner's associat | ion or con | dominium dues | | 4d. \$ | | 0.00 |
| 5. | Additional I | mortgage payme | ents for yo | our residence, such as ho | me equity loans | 5. \$ | | 0.00 |

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| Debtor 1 Debtor 2 | | Joseph H | | | Case number (if known) | | |
|----------------------|---|---------------|---|-----------------------|------------------------|------------------------------|--|
| | | Tina M R | usso | Case num | | | |
| | | | | | | | |
| - | I tilit i a. | | heat, natural gas | 6a. | \$ | 200.00 | |
| | a. b. | - | ver, garbage collection | 6b. | \$ | 50.00 | |
| | D. C. | | e, cell phone, Internet, satellite, and cable services | 6c. | | 200.00 | |
| _ | d. | Other. Spe | | 6d. | · | | |
| _ | | | ekeeping supplies | od. 7. | \$ | 0.00 400.00 | |
| | | | hildren's education costs | 8. | \$ | 0.00 | |
| _ | | | ry, and dry cleaning | 9. | \$ | | |
| | | - | - | 9. 10. | \$ | 24.00 | |
| | | • | roducts and services ntal expenses | 10. | · — | 30.10 | |
| | | | Include gas, maintenance, bus or train fare. | 11. | Ψ | 0.00 | |
| | | | ar payments. | 12. | \$ | 100.00 | |
| | | | clubs, recreation, newspapers, magazines, and books | 13. | \$ | 0.00 | |
| | | | ributions and religious donations | 14. | \$ | 0.00 | |
| | | rance. | | | – | 0.00 | |
| | | | surance deducted from your pay or included in lines 4 or 20. | | | | |
| | | Life insura | , , , | 15a. | \$ | 0.00 | |
| 1: | 5b. | Health insu | urance | 15b. | \$ | 0.00 | |
| 1 | 5c. | Vehicle ins | surance | 15c. | \$ | 200.00 | |
| 1: | 5d. | Other insu | rance. Specify: | 15d. | \$ | 0.00 | |
| . T | axe | s. Do not in | clude taxes deducted from your pay or included in lines 4 or | 20. | | | |
| | рес | | , , , | 16. | \$ | 0.00 | |
| | | | ease payments: | | | | |
| 1 | 7a. | Car payme | ents for Vehicle 1 | 17a. | \$ | 0.00 | |
| 1 | 7b. | Car payme | ents for Vehicle 2 | 17b. | \$ | 0.00 | |
| 1 | 7c. | Other. Spe | ecify: | 17c. | \$ | 0.00 | |
| 1 | 7d. | Other. Spe | ecify: | 17d. | \$ | 0.00 | |
| | | | of alimony, maintenance, and support that you did not re | | • | 0.00 | |
| | | | your pay on line 5, Schedule I, Your Income (Official Form | 106I). ^{18.} | · | 0.00 | |
| | | | s you make to support others who do not live with you. | | \$ | 0.00 | |
| | pec | , | | 19. | | | |
| | | | erty expenses not included in lines 4 or 5 of this form or | | | 0.00 | |
| | | | s on other property | 20a. | · · | 0.00 | |
| | | Real estate | | 20b. | · | 0.00 | |
| | | | nomeowner's, or renter's insurance | 20c. | · | 0.00 | |
| | | | ce, repair, and upkeep expenses | 20d. | · - | 0.00 | |
| | | | er's association or condominium dues | 20e. | · | 0.00 | |
| . О | the | r: Specify: | | 21. | _+\$ | 0.00 | |
| . с | alcı | ulate vour r | monthly expenses | | | | |
| | | | through 21. | | \$ | 2,849.10 | |
| | | | 2 (monthly expenses for Debtor 2), if any, from Official Form | 106.J-2 | \$ | 2,010.10 | |
| | | | a and 22b. The result is your monthly expenses. | | \$ | 2.840.40 | |
| 2 | 20. / | Auu IIIIe 22a | a and 22b. The result is your monthly expenses. | | Φ | 2,849.10 | |
| . C | alcı | ulate your r | monthly net income. | | | | |
| 2 | 3a. | Copy line | 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 3,449.10 | |
| | 3b. Copy your monthly expenses from line 22c above. | | | | -\$ | 2,849.10 | |
| | | | | | | | |
| 2 | 3c. | • | our monthly expenses from your monthly income. | 00- | ф | 600.00 | |
| | | The result | is your monthly net income. | 23c. | \$ | 600.00 | |
| 4 - | ٠ | 011 0V=00* = | on increase or degrees in very expenses within the con- | ofter very file this | form? | | |
| | | | an increase or decrease in your expenses within the year or decrease in your expect to finish paying for your car loan within the year or do you expect to finish paying for your car loan within the year or do you expect to finish paying for your car loan within the year or do you expect to finish paying for your car loan within the year. | | | ase or decrease because of a | |
| | | | terms of your mortgage? | .post your mongage | | 3. 45010400 5004450 01 d | |
| _ | No | | | | | | |
| | | | Explain here: | | | | |
| |] Y€ | es. | Explain here: | | | | |

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| Fill in this infor | mation to identify your | case: | | | |
|---------------------|---|---|------------------------------|-----------------------|--------------------------------------|
| Debtor 1 | Joseph H Russo | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | Tina M Russo | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | ☐ Check if this is an amended filing |
| | | | | | amonaca ming |
| | | | | | |
| Official Forn | m 106Dec | | | | |
| Declarat | tion About a | n Individual | Debtor's Scl | hedules | 12/1: |
| Doolarae | TOTT / COULT | - III III III III III III III III III I | Deptol 5 Col | | 12/1 |
| If two married pe | eople are filing togethe | r, both are equally respo | nsible for supplying corre | ect information. | |
| Vou must file thi | is form whonover you fi | la hankruntay sahadular | s or amondod schodulos | Making a falso state | ement, concealing property, or |
| obtaining money | | n connection with a banl | | | 00, or imprisonment for up to 20 |
| | | | | | |
| Sign | n Below | | | | |
| Did you pa | y or agree to pay some | one who is NOT an attor | rney to help you fill out ba | inkruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. N | Name of person | | | Attach Ban | kruptcy Petition Preparer's Notice, |
| <u> </u> | | | | | n, and Signature (Official Form 119) |
| • | alty of perjury, I declare e true and correct. | that I have read the sum | nmary and schedules filed | with this declaration | on and |
| X /s/.lose | enh H Russo | | X /s/ Tina M R | USSO | |

Joseph H Russo

Signature of Debtor 1

Date May 12, 2017

Tina M Russo

Signature of Debtor 2

Date May 12, 2017

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| HII | in this infor | nation to identify your | casa: | | | | | | | | | |
|---|---|-------------------------------------|--|---|---|---|--|--|--|--|--|--|
| | otor 1 | | case. | | | | | | | | | |
| Der | itor i | Joseph H Russo First Name | Middle Name | Last Name | | | | | | | | |
| Deb | tor 2 | Tina M Russo | | | | | | | | | | |
| (Spo | use if, filing) | First Name | Middle Name | Last Name | | | | | | | | |
| United States Bankruptcy Court for the | | nkruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | | | | | | | |
| Cas | e number | | | | | | | | | | | |
| (if kn | own) | | | | - | heck if this is an mended filing | | | | | | |
| | | | | | | | | | | | | |
| | | rm 107 | Affaire for Individ | duals Filing for B | Pankruptov | 414.0 | | | | | | |
| | | | | | | 4/16 | | | | | | |
| | | | | | equally responsible for supp y additional pages, write you | | | | | | | |
| num | ber (if know | n). Answer every ques | stion. | • | | | | | | | | |
| Par | 11: Give I | Details About Your Ma | rital Status and Where You | Lived Before | | | | | | | | |
| 1 | What is you | r current marital statu | e? | | | | | | | | | |
| •• | Wilat is you | hat is your current marital status? | | | | | | | | | | |
| | ■ Married□ Not ma | | | | | | | | | | | |
| 2. | During the l | ast 3 vears, have you | lived anywhere other than | where you live now? | | | | | | | | |
| | During the last 3 years, have you lived anywhere other than where you live now? | | | | | | | | | | | |
| | ■ No | _ | | | | | | | | | | |
| | Yes. List all of the places you lived in the last 3 years. Do not include where you live now. | | | | | | | | | | | |
| | Debtor 1 P | rior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | ddress: | Dates Debtor 2 lived there | | | | | | |
| | | | | | nity property state or territory | | | | | | | |
| siaie | is and territor | ies include Alizona, Ca | iliomia, idano, Louisiana, ive | vada, New Mexico, Puerto R | lico, Texas, Washington and W | isconsin.) | | | | | | |
| | No | | | | | | | | | | | |
| | ☐ Yes. Ma | ake sure you fill out Sch | nedule H: Your Codebtors (O | fficial Form 106H). | | | | | | | | |
| Par | 2 Expla | in the Sources of You | r Income | | | | | | | | | |
| | | | | | | | | | | | | |
| 4. | Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. | | | | | | | | | | | |
| | □ No | | | | | | | | | | | |
| | _ | I in the details. | | | | | | | | | | |
| | | | Dalitan | | Dalitano | | | | | | | |
| | | | Debtor 1 | 0 | Debtor 2 | 0 | | | | | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | | | | | |
| From January 1 of current year until the date you filed for bankruptcy: | | | ■ Wages, commissions, bonuses, tips | \$3,000.00 | ☐ Wages, commissions, bonuses, tips | \$0.00 | | | | | | |
| | | | ☐ Operating a business | | ☐ Operating a business | | | | | | | |
| | | | - Operating a business | | | | | | | | | |

Official Form 107

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Debtor 1 Joseph H Russo Tina M Russo Debtor 2 Case number (if known) **Debtor 1** Debtor 2 Sources of income **Gross income** Sources of income Gross income Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$12,448.00 ☐ Wages, commissions, \$0.00 Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$12,000.00 \$0.00 ■ Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions and exclusions) (before deductions and exclusions) From January 1 of current year until SSI Benefits \$5,364.00 the date you filed for bankruptcy: For last calendar year: SSI Benefits \$16,000.00 (January 1 to December 31, 2016) For the calendar year before that: SSI Benefits \$16,000.00 (January 1 to December 31, 2015) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? \square No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Dates of payment Total amount Amount you Was this payment for ... still owe paid

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| Debtor 2 | Tina M Russo | | Cas | se number (if known) | | | | | | | |
|---------------------------|---|---------------------------------------|-----------------------|----------------------|---------------------|-------------------|--|--|--|--|--|
| <i>Insid</i> of war bu | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporation of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. | | | | | | | | | | |
| | No | | | | | | | | | | |
| | Yes. List all payments to an insider. | | | | | | | | | | |
| Ins | ider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for thi | s payment | | | | | |
| insi | Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. | | | | | | | | | | |
| | No Yes. List all payments to an insider | | | | | | | | | | |
| Ins | ider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for thi | | | | | | |
| Part 4: | Identify Legal Actions, Repossessio | ns and Foreclosures | | | | | | | | | |
| | | · | | | | | | | | | |
| List | Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. | | | | | | | | | | |
| | No | | | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | | | |
| | se title se number | Nature of the case | Court or agency | | Status of the case | | | | | | |
| US | Bank | foreclosure | Boone County | | ☐ Pending | | | | | | |
| VS | srph & Tina Russo | | | | ☐ On appeal | | | | | | |
| | CH154 | | | | Concluded | | | | | | |
| Che ■ □ | nin 1 year before you filed for bankrupt ck all that apply and fill in the details belo No. Go to line 11. Yes. Fill in the information below. | w. | | | shed, attached, s | eized, or levied? | | | | | |
| Cre | editor Name and Address | Describe the Property | | Date | Date | | | | | | |
| | | Explain what happene | d | | | property | | | | | |
| | nin 90 days before you filed for bankru bunts or refuse to make a payment bed No Yes. Fill in the details. | | cluding a bank or fir | nancial institution | ı, set off any amo | ounts from your | | | | | |
| Cre | editor Name and Address | Describe the action the creditor took | | | Date action was Amo | | | | | | |
| | Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No | | | | | | | | | | |
| _ | | | | | | | | | | | |
| Ц | Yes | | | | | | | | | | |

Debtor 1 Joseph H Russo

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| | otor 1 Joseph H Russo Tina M Russo | Case numb | Der (if known) | |
|------|--|---|-----------------------------------|---------------------------|
| Part | t 5: List Certain Gifts and Contributions | | | |
| 3. | | tcy, did you give any gifts with a total value of mor | e than \$600 per person' | ? |
| | Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift and Address: | Describe the gifts | Dates you gave the gifts | Value |
| | Within 2 years before you filed for bankrup No Yes. Fill in the details for each gift or cont | tcy, did you give any gifts or contributions with a t | otal value of more than | \$600 to any charity? |
| | Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | Describe what you contributed | Dates you contributed | Value |
| Part | t 6: List Certain Losses | | | |
| | Within 1 year before you filed for bankruptor gambling? No Yes. Fill in the details. | cy or since you filed for bankruptcy, did you lose a | nything because of thef | t, fire, other disaster |
| | how the loss occurred | escribe any insurance coverage for the loss clude the amount that insurance has paid. List pending surance claims on line 33 of Schedule A/B: Property. | Date of your loss | Value of property lost |
| Part | t7: List Certain Payments or Transfers | | | |
| | consulted about seeking bankruptcy or pre | cy, did you or anyone else acting on your behalf pa eparing a bankruptcy petition? parers, or credit counseling agencies for services requ | | rty to anyone you |
| | □ No■ Yes. Fill in the details. | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| - | Eric Pratt Law Firm P.C. 5301 E. State St, Ste 116 Rockford, IL 61108 rockford@jordanpratt.com | Attorney Fees | | \$0.00 |
| | promised to help you deal with your creditor. Do not include any payment or transfer that you | | ay or transfer any prope | rty to anyone who |
| | ■ No □ Yes. Fill in the details. | | | |
| | Person Who Was Paid Address | Description and value of any property transferred | Date payment or transfer was | Amount of payment |

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Debtor 1 Joseph H Russo Debtor 2 Tina M Russo

Case number (if known)

| 18. | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. | | | | | | | |
|-----|--|--|--------------------|-------------|---|------------------------|--|--|
| | | | | | | | | |
| | Person Who Received Transfer Address | Description and v property transferr | | payme | ibe any property or ents received or debts n exchange | Date transfer was made | | |
| | Person's relationship to you | | | | | | | |
| 19. | Within 10 years before you filed for bankruptc beneficiary? (These are often called asset-prote | | y property to a s | self-settle | d trust or similar device o | of which you are a | | |
| | Yes. Fill in the details. | | | | | | | |
| | Name of trust | Description and v | alue of the prop | erty trans | ferred | Date Transfer was | | |
| | | | | | | made | | |
| Pai | tt 8: List of Certain Financial Accounts, Instr | uments, Safe Deposit | Boxes, and Sto | rage Unit | s | | | |
| 20. | Within 1 year before you filed for bankruptcy, | were any financial ac | counts or instru | ments he | ld in your name, or for yo | our benefit, closed. | | |
| 20. | sold, moved, or transferred? | more arry milanetar ac | oounto or mond | | ia in your name, or for yo | our borront, crocou, | | |
| | Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage | | | | | | | |
| | houses, pension funds, cooperatives, associa | ations, and other finar | ncial institutions | i . | | | | |
| | ■ No | | | | | | | |
| | Yes. Fill in the details. | | | | | | | |
| | Name of Financial Institution and L | ast 4 digits of | Type of accou | nt or | Date account was | Last balance | | |
| | Address (Number, Street, City, State and ZIP account number instrument closed, sold, moved, or transferred | | | | before closing or transfer | | | |
| 21. | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? | | | | | | | |
| | ■ No | | | | | | | |
| | Yes. Fill in the details. | | | | | | | |
| | Name of Financial Institution | Who also had acc | ees to it? | Describe | the contents | Do you still | | |
| | Address (Number, Street, City, State and ZIP Code) | | | Describe | ine contents | have it? | | |
| 22. | Have you stored property in a storage unit or | place other than your | home within 1 y | year befor | e you filed for bankrupto | y? | | |
| | | | | | | - | | |
| | ■ No | | | | | | | |
| | Yes. Fill in the details. | | | | | | | |
| | Name of Storage Facility | Who else has or h | nad access | Describe | the contents | Do you still | | |
| | Address (Number, Street, City, State and ZIP Code) | to it? Address (Number, S | | | | have it? | | |
| | | State and ZIP Code) | | | | | | |
| Pai | rt 9: Identify Property You Hold or Control fo | r Someone Else | | | | | | |
| 23. | Do you hold or control any property that some for someone. | eone else owns? Inclu | ude any property | y you bori | owed from, are storing f | or, or hold in trust | | |
| | _ | | | | | | | |
| | □ No | | | | | | | |
| | Yes. Fill in the details. | | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the prop (Number, Street, City, S Code) | | Describe | the property | Value | | |
| | mother same as debtor | code) | | personal | & household items | Unknown | | |
| | | | | | | | | |

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Joseph H Russo Debtor 1 Debtor 2 Tina M Russo

Case number (if known)

| | Part 10: | Give Details About Environmental Information |
|--|----------|---|
|--|----------|---|

| For th | e purpose o | Part 10. | the f | ollowing | definitions | apply: |
|--------|-------------|----------|-------|----------|-------------|--------|
| | | | | | | |

| For | the purpose of Part 10, the following definitions | apply: | | | | | | |
|--|---|--|---------------------------------------|----------------------|--|--|--|--|
| | Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. | | | | | | | |
| | Site means any location, facility, or property as to own, operate, or utilize it, including disposal | - | law, whether you now own, operate, o | r utilize it or used | | | | |
| | Hazardous material means anything an environ hazardous material, pollutant, contaminant, or | | s waste, hazardous substance, toxic s | ubstance, | | | | |
| Rep | port all notices, releases, and proceedings that y | ou know about, regardless of wher | n they occurred. | | | | | |
| 24. | Has any governmental unit notified you that yo | u may be liable or potentially liable | under or in violation of an environme | ntal law? | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | | |
| 25. | Have you notified any governmental unit of any | release of hazardous material? | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | | |
| 26. | Have you been a party in any judicial or admini | strative proceeding under any envi | ronmental law? Include settlements a | nd orders. | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case | | | | |
| Pai | rt 11: Give Details About Your Business or Con | nnections to Any Business | | | | | | |
| 27. | Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? | | | | | | | |
| | ☐ A sole proprietor or self-employed in a | trade, profession, or other activity, | either full-time or part-time | | | | | |
| | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | | | |
| | ☐ A partner in a partnership | | | | | | | |
| | ☐ An officer, director, or managing execu | tive of a corporation | | | | | | |
| | ☐ An owner of at least 5% of the voting or | equity securities of a corporation | | | | | | |
| | ■ No. None of the above applies. Go to Part | 12. | | | | | | |
| Yes. Check all that apply above and fill in the details below for each business. | | | | | | | | |
| | | | | | | | | |

Business Name

(Number, Street, City, State and ZIP Code)

Address

Describe the nature of the business

Name of accountant or bookkeeper

Employer Identification number

Dates business existed

Do not include Social Security number or ITIN.

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Debtor 1 Joseph H Russo Debtor 2 Tina M Russo

> Address (Number, Street, City, State and ZIP Code)

Name

Case number (if known)

| 28. | Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. |
|-----|--|
| | ■ No |
| | ☐ Yes Fill in the details below |

Date Issued

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| Debtor 1 | Joseph H Russo | | | |
|-------------|--|-----------------------|---------------------------|--|
| Debtor 2 | Tina M Russo | | | Case number (if known) |
| | | | | |
| Part 12: | Sign Below | | | |
| I have read | d the answers on this <i>Statement of</i> | Financial Affairs at | nd any attachments, ar | nd I declare under penalty of perjury that the answers |
| are true ar | nd correct. I understand that making | g a false statement | concealing property, | or obtaining money or property by fraud in connection |
| | kruptcy case can result in fines up §§ 152, 1341, 1519, and 3571. | to \$250,000, or imp | orisonment for up to 20 |) years, or both. |
| ` | , , , | | | |
| /s/ Josep | h H Russo | | a M Russo | |
| Joseph F | l Russo | Tina N | /I Russo | |
| Signature | e of Debtor 1 | Signat | ure of Debtor 2 | |
| Date M | ay 12, 2017 | Date | May 12, 2017 | |
| Did you at | tach additional pages to Your State | ement of Financial | Affairs for Individuals | Filing for Bankruptcy (Official Form 107)? |
| ■ No | | | | |
| ☐ Yes | | | | |
| Did you pa | ay or agree to pay someone who is | not an attorney to l | nelp you fill out bankru | uptcy forms? |
| ■ No | | | | |
| ☐ Yes. Na | ame of Person Attach the Ban | kruptcy Petition Prej | parer's Notice, Declarati | on, and Signature (Official Form 119). |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chap | ter 7: | Liquidation |
|------|--------|--------------------|
| | \$245 | filing fee |
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

□The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$0.00

toward the flat fee, leaving a balance due of \$4,000.00; and \$363.00 for expenses,

leaving a balance due for the filing fee of \$0.00.

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date:May 12, 2017 | it to appear in court to object. | |
|--------------------|-----------------------------------|--|
| Signed: | | |
| /s/ Joseph H Russo | /s/ William T. Cacciatore Jr. | |
| Joseph H Russo | William T. Cacciatore Jr. 6244392 | |
| | Attorney for the Debtor(s) | |
| /s/ Tina M Russo | • | |
| Tina M Russo | | |
| Debtor(s) | | |
| | | |

Do not sign this agreement if the amounts are blank.

Local Bankruptcy Form 23c

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| | | Joseph H Russo | | | G V | | |
|---|--|--|--|--|-----------------------|----------------------|-----------------|
| In r | re – | Tina M Russo | | Dobton(s) | Case No. | 40 | |
| | | | | Debtor(s) | Chapter | _13 | |
| | | DISCI | LOSURE OF COMP | ENSATION OF ATTOR | NEY FOR DE | CBTOR(S) | |
| 1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named deb compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: | | | | | to me, for services i | | |
| | | For legal services, l | I have agreed to accept | | \$ | 4,000.00 | |
| | | | | ed | | 0.00 | |
| | | | | | _ | 4,000.00 | |
| 2. | \$ | 310.00 of the fili | ng fee has been paid. | | | | |
| 3. | The | source of the compe | ensation paid to me was: | | | | |
| | | ■ Debtor □ | Other (specify): | | | | |
| 4. | The | source of compensa | tion to be paid to me is: | | | | |
| | | ■ Debtor □ | Other (specify): | | | | |
| 5. | | I have not agreed to | share the above-disclosed co | mpensation with any other person un | nless they are memb | pers and associates | of my law firm. |
| | ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. | | | | | law firm. A | |
| 6. | In r | return for the above-c | disclosed fee, I have agreed to | o render legal service for all aspects | of the bankruptcy c | ase, including: | |
| | b. 1 c. 1 | Preparation and filing | g of any petition, schedules, see debtor at the meeting of creeneeded] | ndering advice to the debtor in deter statement of affairs and plan which n ditors and confirmation hearing, and | nay be required; | - | kruptcy; |
| 7. | Ву | | | fee does not include the following s chargeability actions, relief from s | | y other adversary | proceeding. |
| | | See Attached | CARA | | | | |
| | | | | CERTIFICATION | | | |
| this | | rtify that the foregoing truptcy proceeding. | ng is a complete statement of | any agreement or arrangement for p | ayment to me for re | epresentation of the | debtor(s) in |
| | May | 12, 2017 | | /s/ William T. Caccia | atore Jr. | | |
| _ | Date | | | William T. Cacciator | e Jr. 6244392 | | |
| | | | | Signature of Attorney Eric Pratt Law Firm | D C | | |
| | | | | 5301 E. State St, St | | | |
| | | | | Rockford, IL 61108 | | | |
| | | | | 815-315-0683 Fax: | | | |
| | | | | rockford@jordanpra Name of law firm | u.com | | |
| 1 | | | | ve oj vem jum | | | I |

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United States Bankruptcy Court Northern District of Illinois

| In re | Joseph H Russo Tina M Russo | | Case No. | |
|-------|---|---------------------------------------|------------|----|
| | | Debtor(s) | Chapter 13 | |
| | VERIFICATION OF CREDITOR MATRIX | | | |
| | | Number of Creditors: | | 19 |
| | The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge. | | | |
| Date: | May 12, 2017 | /s/ Joseph H Russo | | |
| | | Joseph H Russo Signature of Debtor | | |
| Date: | May 12, 2017 | /s/ Tina M Russo Tina M Russo | | |
| | | Signature of Debtor | | |

American Family Ins Madison, WI 53777

Anselmo, Lindberg, Oliver 1771 W. Diehl Rd Suite 120 Naperville, IL 60563

Berks Credit & Collections Po Box 329 Temple, PA 19560

Caliber Home Loans, In Po Box 24610 Oklahoma City, OK 73124

Cepamerica Box 582663 Modesto, CA 95358

Convergent Heathcare Recovery 121 Ne Jefferson St Suite 100 Peoria, IL 61602

Credit Collection 725 Canton St Norwood, MA 02062

Creditors Protection S Po Box 4115 Rockford, IL 61101

Frontier Communication 19 John St Middletown, NY 10940

Il Pathologist Box 9846 Peoria, IL 61612

Mutual Management Serv 7177 Crimson Ridge Dr St Rockford, IL 61107

OneMain Attn: Bankruptcy 601 Nw 2nd St Evansville, IN 47708

OSF Healthcare 7978 Solution Center Chicago, IL 60677-7009

osf lifeline Box 17115 Rockford, IL 61110

OSF Medical Center P.O. Box 91011 Chicago, IL 60680

Rockford Mercantile 2502 S. Alpine Rd Rockford, IL 61108

Rockford Radiology Box 1790 Brookfield, WI 53008

Stellar Recovery Inc Attn: Bankruptcy 4500 Salisbury Road Ste 105 Jackonville, FL 32216

Synchrony Bank/Care Credit Attn: Bankruptcy Po Box 956060 Orlando, FL 32896